

ER 11-1989/s

21 MAR 1959

Dr. Robert R. Citron

Dear Dr. Citron:

Thank you for your letter of March 3rd and for the material which you enclosed on the treatment of cancer. I have sent all of this to the physicians who are caring for my brother as I believe they are in the best position to decide what would be the best therapy for him. I have been assured that they will give careful review to the suggestions which are being made by the friends and well-wishers of Mr. Dulles.

Thank you again for your thoughtfulness.

Sincerely,

SIGNED  
Allen W. Dulles  
Director

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ROBERT R. CITRON, M. D.

11-1989

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March 3, 1959

The Hon. Allen Dulles, Director  
Central Intelligence Agency  
Washington, D. C.

Dear Mr. Dulles:

Only the most urgent circumstances of Secretary Dulles' illness and the national and international developments so directly related to this would have occasioned the undersigned to submit the information included herewith. Not only is the life and welfare of Secretary Dulles directly concerned, but many other factors and circumstances are so closely related to the psychology and determination which he represents, as to emphasize the problem of cancer as one of the utmost and basic importance to all concerned.

For several years, the undersigned has maintained with staff members of the National Cancer Institute a very active correspondence, based upon authentic and completely disclosed techniques of lipid immunochemistry, as applied to the problem of cancer therapy and control. This approach has not, as yet, been accepted by staff members of the National Cancer Institute for reasons which are not clearly defined, and under circumstances which suggest so many commitments to the large and influential pharmaceutical companies, on the basis of chemotherapeutic research, as to preclude an open-minded and objective attitude toward the much more feasible, fruitful and effective techniques of lipid immunochemistry referred to herewith.

If a "gentlemen's agreement" between staff members of the National Cancer Institute and the pharmaceutical companies currently engaged in extensive and expensive chemotherapeutic research tacitly exists, this in itself would occasion an unwise and hazardous degree of self-imposed limitations as to scope and objectivity at the policy-making level of National Cancer Institute staff members. This is precisely the situation which currently exists, and it is entirely too costly and too inefficient a situation to tolerate, when such enormously harmful and tragic consequences result therefrom.

The work of the undersigned is substantially supported by the current literature in this field, particularly that concerning the work of Dr. M. M. Rapport of Sloan-Kettering Institute, as indicated by the references listed herewith. In addition, I have offered to finance a sufficient series of experiments to fully evaluate the status of lipid immunochemistry, as applied to the problem of cancer therapy and control.

Reg # 4270

The Hon. Allen Dulles

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March 3, 1959

I have attempted several times to obtain commercial laboratory testing of this same approach. The net results of these attempts have been to form the conclusion that most of the competent laboratories in this field are also so dependent upon and committed to similar contracts with the National Cancer Institute as to effectively stifle any form of cancer research, particularly that of immunology, which is not directly related to the relatively narrow, stultified, frustrating and unfruitful chemotherapeutic category, which so obviously represents the old philosophy of "putting all your eggs in one basket".

The Russians, Czechs and other laboratories and agencies throughout the world are by no means idle in this field, and if this most practical and promising means of cancer therapy is bypassed much longer, it will be at the imminent risk of another scientific sputnik humiliation of American scientific prestige.

I have offered to give transfusions or blood serum from myself as a blood donor for Secretary Dulles' treatment, and several of my friends and associates who likewise received a series of cancer lipid vaccine injections here in Stockton have joined me in this offer. We cannot do much more than to alert you as to the nature of the current impasse, and to ask of you and those in authority at the executive and legislative level of our national government to thoroughly examine and review the policies and purposes which have led to this ominous rejection of a positive and scientifically objective approach to the cancer problem, as compared to the more than 10-year history of frustration and failure of the current chemotherapy screening project.

Thanking you for the privilege of this correspondence, and looking forward to your comments and recommendations, I am

Most respectfully and sincerely yours,

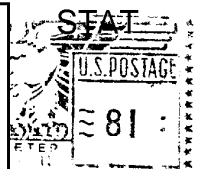
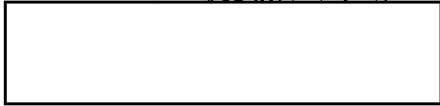
*Robert R. Citron*

Robert R. Citron, M. D.

RRC:dma

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Robert A. Citron F. D.



**AIR MAIL**  
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The Hon. Allen Dulles, Director  
Central Intelligence Agency  
Washington, D. C.

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# Medicine Abroad

## Cancer Incidence in Soviet Union Reported

By World Wide Medical News Service  
Moscow, Russia

**Vladivostok**—The incidence of various forms of cancer varies widely in the Soviet Union from that in other industrialized countries. Prof. Nikolai Blokhin, Director of the Institute of Experimental Pathology and Cancer Therapy, Moscow, told a meeting here of the Austrian Cancer Association.

In contrast to the Western countries, lung cancer has an incidence of only 6-7 per cent, and gastric cancer is highest, with 29 per cent. Cancer of the female genital organs and cancer of the breast are next in frequency.

This cancer is much more frequent in the south than in the rest of the country, Dr. Blokhin pointed out, but the incidence of cancer of the esophagus is comparatively high in the north, possibly because of the habit of consuming very hot food and drink during the extremely long, cold winter season. Primary liver cancer, however, is still rare among the European Russians.

### Surgery More Radical

In recent years surgical procedures have become more radical in the Soviet Union, corresponding to developments in the West. However, results are still unsatisfactory, he said. Five-year cures of cases after radical resection of gastric, esophageal, and pulmonary cancer reach a maximum of 30-35 per cent.

At least 50 per cent of all cases of gastric, esophageal, and pulmonary cancer are diagnosed too late. The percentage of inoperable cases is declining annually as a result of the increasing periodic cancer detection checkups, he pointed out.

About 10,000,000 persons in the Soviet

Union undergo such checkups annually. These examinations are carried out by 112 oncologic institutes throughout the country. All methods feasible for mass examinations, including cytology, are utilized, he explained.

Mass propaganda is carried out by various institutions and trade unions, asking all men and women over 35 to submit to regular cancer detection examinations. In addition, the institutes carry out such examinations in factories where workers may be exposed to carcinogenic agents.

### Institutes Are Hospitals

The institutes are cancer hospitals with 50-200 beds, with an outpatient department, which carries out prophylactic examination series, and include x-ray therapy and a statistical division. Cancer patients are also referred for treatment to other hospitals; this is routinely done with terminal patients to make them believe they are not suffering from cancer.

Every postgraduate medical school has its chair of oncology, and physicians working in the oncologic institutes are trained there and return to them from time to time for postgraduate courses. Two large institutes for cancer research are located in Moscow and Leningrad.

While there are some adherents to the virus theory in the Soviet Union, most Soviet scientists believe irritation by carcinogenic agents is the cause of many cancers. Globular inclusion bodies resembling viruses have been discovered under the electron microscope in various neoplasms, especially gastric polyps.

In tissue cultures taken from rats and mice, malignant changes have occurred after addition of a virus plus carcinogenic agent. Also, specific tumor antigens have been discovered, but whether these are virus antigens has not yet been determined, he said.

## WHO Group Considers Second Pharmacopoeia

Special to Scope Weekly

**Geneva**—The preparation of the second edition of the *International Pharmacopoeia* was the main topic under discussion at the meeting here of the Expert Committee on the International Pharmacopoeia of the World Health Organization.

The pharmacopoeia contains proposed specifications for the quality control of pharmaceutical preparations. Volumes I and II of the first edition have been published by WHO in French, English, and Spanish; translations in German and Japanese have also been made. A supplement is in press.

The Expert Committee also considered at the same session the following subjects: publication of information sheets for new pharmaceutical preparations; principles of classification of pharmaceutical preparations; use made in various countries of the specifications of the pharmacopoeia.

## Trial Vaccination With BCG As Leprosy Prevention Urged

By World Wide Medical News Service

**Tokyo**—Following a series of reports on the effects of BCG vaccination in prevention of leprosy delivered at the recent International Congress of Leprology meeting here, the Congress issued a report recommending its use. However, the report suggested that experiments involving BCG be well planned and controlled since positive proof of the vaccine's preventive powers is still lacking.

One of the reports by Dr. Ken Yanagisawa, Institute of Health, Tokyo, told of experiments with children of leprosy patients. Of 133 children who received BCG vaccination, only two contracted leprosy. Of a control group of 33 who did not receive BCG, 14 contracted the disease. Dr. Yanagisawa said.

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